

BARRINGTON RECREATION DEPARTMENT (247-1900 x 381)**April 2015 SCHOOL'S OUT REGISTRATION FORM****April 20th -24th Mornings: 9:30 AM – 12:00 PM Afternoons: 12:30 PM - 3:00 PM****BARRINGTON MIDDLE SCHOOL Ages 5 – 12**Child's Name : _____ ☐ Boy ☐ Girl Age: _____

Address: _____

Email: _____

Emergency Phone/Name: _____

Cell: _____

Allergies/Medical Conditions/Medication: _____

I, the parents/guardian of the above child(ren), hereby give my approval for his/her participation in any/all activities during the Barrington Recreation Department's 2015 April vacation programs at the Barrington Middle School. I assume all risks and hazards incidental to such participation, including transportation to and from such activities, and hereby waive, release, absolve, indemnify, and agree to hold harmless all individuals responsible for the conduct or activity involving my child(ren). Also, I understand that registrations for children requiring special attention are reviewed on a case-by-case basis with the Recreation and program director(s). I understand that the Recreation Department does not receive specialized training for various special needs, but will work with individuals as appropriate. I will provide as much detail as possible, including any physical/emotional needs or medications involved so that the staff will be able to provide a positive experience for each child.

Signature (Parent/Guardian) _____

Parent or Guardian: _____

(Please print)

Please make checks payable to *The Town of Barrington*. Bring this registration form to BMS when you drop off your child.

\$6 PER SESSION PER CHILD**Check all sessions that apply**

Monday, April 20	Tuesday, April 21	Wed, April 22	Thursday, April 23	Friday, April 24
9:30 – 12:00 Session 1____ 12:30 – 3:00 Session 2____ \$6 for each session checked	9:30 – 12:00 Session 3____ 12:30 – 3:00 Session 4____ \$6 for each session checked	9:30 – 12:00 Session 5____ 12:30 – 3:00 Session 6____ \$6 for each session checked	9:30 – 12:00 Session 7____ 12:30 – 3:00 Session 8____ \$6 for each session checked	9:30 – 12:00 Session 9____ 12:30 – 3:00 Session 10____ \$6 for each session checked

For official use only:

Monday, April 20	Tuesday, April 21	Wed, April 22	Thursday, April 23	Friday, April 24
Cash_____ Check#_____ Amount_____	Cash_____ Check#_____ Amount_____	Cash_____ Check#_____ Amount_____	Cash_____ Check#_____ Amount_____	Cash_____ Check#_____ Amount_____

Payment for more than one child – Name(s): _____

Additional notes: _____